SECTION 5

ADMINISTRATIVE SERVICES

TABLE OF CONTENTS

SECTION 5 ADMINISTRATIVE SERVICES

GENERAL INFORMATION

ADMINISTRATION

The South Carolina Department of Health and Human Services (DHHS) is a cabinet agency of the South Carolina Governor's Office. The DHHS serves as the single state agency designated to administer the South Carolina Medicaid program and is responsible for determining Medicaid eligibility for all coverage groups except Supplemental Security Income (SSI). This section outlines available services for Medicaid providers and beneficiaries, including telephone numbers, addresses, and other appropriate resource information.

CORRESPONDENCE AND INQUIRIES

All correspondence to South Carolina Medicaid should be directed to the SCDHHS Provider Service Center (PSC) at 1-888-289-0709. In addition, provider may submit an online inquiry at http://www.scdhhs.gov/contact-us. Inquiries concerning specific claims should also be directed to the PSC, but only after corrections have been made on rejected claims and all claims filing requirements have been met. Medicaid Provider Inquiry (DHHS Form 140) may be used to check the status on outstanding claims. (See the blank form in the Forms section.) Always include the provider's Medicaid number, the resident's Medicaid number, and the date of service when requesting the status of outstanding claims. **Allow 45 days from the submission date before requesting the status of the claim.**

Questions concerning beneficiary eligibility or identification numbers should be directed to the SCDHHS county office in the beneficiary's county of residence. Beneficiaries who have questions regarding specific coverage issues should be referred to the appropriate staff of their county SCDHHS office for assistance. To verify eligibility status, please use the South Carolina Medicaid Web-based Claims Submission Tool (Web Tool). For information on the Web Tool, please contact the PSC at 1-888-289-0709.

SECTION 5 ADMINISTRATIVE SERVICES

GENERAL INFORMATION

PROVIDER ENROLLMENT CHANGES/UPDATES

Non-contracted providers (such as pharmacists) must report any changes in enrollment information, such as mailing and/or payment address, ownership, telephone number, license/permit number, etc., to the address listed below:

> Medicaid Provider Enrollment
> Post Office Box 8809
> Columbia, SC 29202-8809
> Telephone: (803) 788-7622 (extension 41650)
> Fax: (803) 699-8637

Additionally, once a pharmacy is an enrolled Medicaid provider, the Pharmacy Services program area must be immediately notified (either verbally, in writing, or by fax) if the pharmacy sustains physical damage (*e.g*., fire, flood, hurricane, etc.) to the extent that it is no longer operational.

When notifying Medicaid of changes in enrollment information, providers must:

1. Be exact regarding the change to be made to their file;

2. Always include their Medicaid provider number (a six character identification number); and

3. Include the name and telephone number of a contact person.

If a provider is paid by electronic funds transfer (EFT) and his/her bank account information sustains a change, Medicaid Provider Enrollment staff should be notified as soon as possible. The provider must complete a new *Authorization Agreement for Electronic Funds Transfer* form, reflecting the account changes. This completed form and a voided check or deposit slip may be faxed to Medicaid Provider Enrollment staff using the fax number listed above. Current EFT-reimbursed providers needing to change their bank account information (or those who wish to begin receiving payment via EFT) may access the *Authorization Agreement for Electronic Funds Transfer* form by following the instructions contained in this specified link:

http://www.scdhhs.gov/openpublic/hipaa/webfiles/EFT%20Agree%20for%20Provider%20Enrollment.pdf

A sample form is also included in the Forms section of this manual.

SECTION 5 ADMINISTRATIVE SERVICES

GENERAL INFORMATION

PROVIDER WORKSHOPS

Regional workshops are conducted as needed to familiarize providers with new Medicaid policies and/or claims submission procedures.

REFUNDS

Although claims reversals (*i.e.,* "voided claims") are preferable (due to rebate invoice issues), if necessary, providers may refund overpayments via check. Refund checks should be made payable to the Department of Health and Human Services and mailed to:

> Department of Health and Human Services
> Attn: Cash Receipts
> Post Office Box 8355
> Columbia, SC 29202-8355

In order for DHHS to correctly post the refund, the *Form for Medicaid Refunds* (DHHS Form 205) must accompany all Medicaid refund checks. (This form may be obtained via DHHS' Web site http://www.scdhhs.gov/.)

Select "Inside DHHS," "Bureaus," and then "Bureau of Fiscal Affairs." Click on "Accounts Receivable – Refund Medicaid.") Contact a Pharmacy Services program representative if a refund is to be made via check rather than by claims reversal. Appropriate documentation (*i.e*., copy of check and completed form 205, etc.) should be furnished to Pharmacy Services staff for inclusion in the provider's file.

SECTION 5 ADMINISTRATIVE SERVICES

GENERAL INFORMATION

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SECTION 5 ADMINISTRATIVE SERVICES

MEDICAID FORMS AND PUBLICATIONS

PROGRAM MANUALS AND BULLETINS

Providers are reminded that Medicaid information, publications, manuals, and various forms may be found at http:/provider.scdhhs.gov/. An additional resource available to pharmacists is the Magellan Medicaid Administration Pharmacy Provider Manual; that publication is located at southcarolina.magellanhealth.com. To request receipt of Medicaid bulletins by email, providers are instructed to go to the following link for instructions:

http://www2.scdhhs.gov/press-releases.

The most current version of this manual is available on the DHHS Web site at http://www.scdhhs.gov.

To order a paper or CD version of this manual, please contact Medicaid Provider Enrollment and Education at 1-888-289-0709. From the Main Menu, select option 4 for the Provider Enrollment and Education Menu, and then select option 3 to request a provider manual. Charges for printed manuals are based on actual costs of printing and mailing.

FORM 126

Providers may be aware of (or suspect) potential abuse or fraud in the Medicaid program. The *Confidential Medicaid Complaint* form (DHHS Form 126) may be used by providers to report suspected abuse or misuse of Medicaid services; a sample Form 126 is included in the Forms section of this manual. There is also a toll-free Medicaid Fraud and Abuse Hotline available to providers and beneficiaries: 1-888-364-3224.

HEALTH INSURANCE INFORMATION REFERRAL FORM

The *Health Insurance Information Referral Form* should be used to notify DHHS when a beneficiary's insurance coverage has lapsed or when a beneficiary has an insurance policy that is not on file with DHHS. A sample form has been included in the Forms section of this manual; additionally, this form may be accessed via Magellan Medicaid Administration's Web site:
http://southcarolina.magellanhealth.com.

SECTION 5 ADMINISTRATIVE SERVICES

MEDICAID FORMS AND PUBLICATIONS

HEALTH INSURANCE INFORMATION REFERRAL FORM (CONT'D.)

Attach any written documentation that supports such information and forward (or fax) those materials to the address indicated on the form.

UNIVERSAL CLAIM FORM

If a claim must be submitted on paper (e.g., billing for dates of service which are more than one year old), the only acceptable paper medium is the Universal Claim Form (UCF) in D.0 format. Providers may contact the National Council for Prescription Drug Products (NCPDP) at www.ncpdp.org/products.aspx to obtain the forms.

SECTION 5 ADMINISTRATIVE SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES COUNTY OFFICES

Questions concerning beneficiary eligibility or correct beneficiary identification numbers should be directed to the DHHS county office in the beneficiary's county of residence. Beneficiaries who have questions regarding specific *drug coverage* issues may be referred to the toll-free Magellan Medicaid Administration Beneficiary Call Center at 1-800-834-2680. All other Medicaid services inquiries should be directed to the DHHS Beneficiary Services' toll-free telephone number: 1-888-549-0820.

To assist providers and beneficiaries, county DHHS office addresses and telephone numbers are listed below:

County	Telephone No.	Address
1. Abbeville County	(864) 366-5638	Medicaid Eligibility Abbeville County DHHS Human Services Building 903 W. Greenwood St. Abbeville, SC 29620-5678 Post Office Box 130 Abbeville, SC 29620-0130
2. Aiken County	(803) 643-1938	Medicaid Eligibility Aiken County DHHS 1410 Park Ave. S.E. Aiken, SC 29801-4776
	Toll Free: 1-888-866-8852	Post Office Box 2748 Aiken, SC 29802-2748

SECTION 5 ADMINISTRATIVE SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES COUNTY OFFICES

County	Telephone No.	Address
3. Allendale County	(803) 584-8137	Medicaid Eligibility Allendale County DHHS 521 Barnwell Highway Allendale, SC 29810 Post Office Box 326 Allendale, SC 29810
4. Anderson County	(864) 260-4541	Medicaid Eligibility Anderson County DHHS 224 McGee Rd. Anderson, SC 29625 Post Office Box 160 Anderson, SC 29622-0160
5. Bamberg County	(803) 245-3932	Medicaid Eligibility Bamberg County DHHS 374 Log Branch Rd. Bamberg, SC 29003 Post Office Box 544 Bamberg, SC 29003
6. Barnwell County	(803) 541-3825	Medicaid Eligibility Barnwell County DHHS 10913 Ellenton Street Barnwell, SC 29812 Post Office Box 648 Barnwell, SC 29812
7. Beaufort County	(843) 255-6095	Medicaid Eligibility Beaufort County DHHS 1905 Duke St. Beaufort, SC 29902-4403 Post Office Box 1255 Beaufort, SC 29901-1255

SECTION 5 ADMINISTRATIVE SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES COUNTY OFFICES

County	Telephone No.	Address
8. Berkeley County	(843) 719-1170	Medicaid Eligibility Berkeley County DSS 2 Belt Dr. Moncks Corner, SC 29461-2801
	Toll Free: 1-800-249-8751	Post Office Box 13748 Charleston, SC 29422-3748
9. Calhoun County	(803) 874-3384	Medicaid Eligibility Calhoun County DHHS 2831 Old Belleville Rd. St. Matthews, SC 29135
		Post Office Box 378 St. Matthews, SC 29135
10. Charleston County	(843) 740-5900	Medicaid Eligibility Charleston County DHHS 326 Calhoun St. Charleston, SC 29401-1124
	Toll Free: 1-800-249-8751	Post Office Box 13748 Charleston, SC 29422-3748
11. Cherokee County	(864) 487-2521	Medicaid Eligibility Cherokee County DHHS 1434 N. Limestone St. Gaffney, SC 29340-4734
		Post Office Box 89 Gaffney, SC 29342
12. Chester County	(803) 377-8135	Medicaid Eligibility Chester County DHHS 115 Reedy St. Chester, SC 29706-1881

SECTION 5 ADMINISTRATIVE SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES COUNTY OFFICES

County	Telephone No.	Address
13. Chesterfield County	(843) 623-5226	Medicaid Eligibility Chesterfield County DHHS 201 N. Page St. Chesterfield, SC 29709-1201 Post Office Box 855 Chesterfield, SC 29709-0855
14. Clarendon County	(803) 435-4305	Medicaid Eligibility Clarendon County DSS 3 S. Church St. Manning, SC 29102 Post Office Box 788 Manning, SC 29102
15. Colleton County	(843) 549-1894	Medicaid Eligibility Colleton County DHHS Bernard Warshaw Building 215 S. Lemacks St. Walterboro, SC 29488 Post Office Box 110 Walterboro, SC 29488
16. Darlington County	(843) 398-4427	Medicaid Eligibility Darlington County DHHS 300 Russell St., Room 145 Darlington, SC 29532-3340 Post Office Box 2077 Darlington, SC 29540-2077
	(843) 332-2289	404 S. Fourth St., Suite 300 Hartsville, SC 29550-5718
17. Dillon County	(843) 774-2713	Medicaid Eligibility Dillon County DHHS 1213 Highway 34 W. Dillon, SC 29536-8141 Post Office Box 351 Dillon, SC 29536-0351

SECTION 5 ADMINISTRATIVE SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES COUNTY OFFICES

County	Telephone No.	Address
18. Dorchester County	(843) 821-0444 Toll Free: 1-800-249-8751	Medicaid Eligibility Dorchester County DSS 216 Orangeburg Rd Summerville, SC 29483-8945 Post Office Box 13748 Charleston, SC 29422-3748
19. Edgefield County	(803) 637-4040	Medicaid Eligibility Edgefield County DHHS 120 W. A. Reel Dr. Edgefield, SC 29824-1607 Post Office Box 386 Edgefield, SC 29824-0386
20. Fairfield County	(803) 589-8035	Medicaid Eligibility Fairfield County DHHS 1136 Kincaid Bridge Rd. Winnsboro, SC 29180-7116 Post Office Box 1139 Winnsboro, SC 29180-5139
21. Florence County	(843) 673-1761	Medicaid Eligibility Florence County DHHS 2685 S. Irby St., Box I Florence, SC 29505-3440
	(843) 394-8575	345 S. Ron McNair Blvd Lake City, SC 29560-3434
22. Georgetown County	(843) 546-5134	Medicaid Eligibility Georgetown County DSS 330 Dozier St. Georgetown, SC 29440-3219 Post Office Box 371 Georgetown, SC 29442

SECTION 5 ADMINISTRATIVE SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES COUNTY OFFICES

County	Telephone No.	Address
23. Greenville County	(864) 467-7800	Medicaid Eligibility Greenville County DSS 301 University Ridge, Suite 6700 Greenville, SC 29601 Post Office Box 100101 Columbia, SC 29202-3101
24. Greenwood County	(864) 229-5258	Medicaid Eligibility Greenwood County DHHS 1118 Phoenix St. Greenwood, SC 29646-3918 Post Office Box 1016 Greenwood, SC 29648-1016
25. Hampton County	(803) 914-0053	Medicaid Eligibility Hampton County DHHS 102 Ginn Altman Ave., Suite B Hampton, SC 29924 Post Office Box 693 Hampton, SC 29924
26. Horry County	(843) 381-8260	Medicaid Eligibility Horry County DHHS 1601 11th Ave., 1st Floor Conway, SC 29526 Post Office Box 290 Conway, SC 29528
27. Jasper County	(843) 726-7747	Medicaid Eligibility Jasper County DHHS 10908 N. Jacob Smart Blvd. Ridgeland, SC 29936

SECTION 5 ADMINISTRATIVE SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES COUNTY OFFICES

County	Telephone No.	Address
28. Kershaw County	(803) 432-3164	Medicaid Eligibility Kershaw County DHHS 110 E. DeKalb St. Camden, SC 29020-4432 Post Office Box 220 Camden, SC 29021-0220
29. Lancaster County	(803) 286-8208	Medicaid Eligibility Lancaster County DHHS 1599 Pageland Highway Lancaster, SC 29720-2409
30. Laurens County	(864) 833-6109	Medicaid Eligibility Laurens County DHHS 93 Human Services Rd. Clinton, SC 29325-7546 Post Office Box 388 Laurens, SC 29360-0388
31. Lee County	(803) 484-5376	Medicaid Eligibility Lee County DHHS 820 Brown St. Bishopville, SC 29010-4207 Post Office Box 406 Bishopville, SC 29010-0406
32. Lexington County	(803) 785-2991 (803) 785-5050	Medicaid Eligibility Lexington County DHHS 605 West Main St. Lexington, SC 29072-2550
33. McCormick County	(864) 465-5221	Medicaid Eligibility McCormick County DHHS 215 N. Mine St. McCormick, SC 29835-8363
34. Marion County	(843) 423-5417	Medicaid Eligibility Marion County DHHS 137 Airport Ct., Suite J Mullins, SC 29574

SECTION 5 ADMINISTRATIVE SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES COUNTY OFFICES

County	Telephone No.	Address
35. Marlboro County	(843) 479-4389	Medicaid Eligibility Marlboro County DHHS County Complex 1 Ag St. Bennettsville, SC 29512-4424 Post Office Box 1074 Bennettsville, SC 29512-1074
36. Newberry County	(803) 321-2159	Medicaid Eligibility Newberry County DHHS County Human Services Center 2107 Wilson Rd. Newberry, SC 29108-1603 PO Box 1225 Newberry, SC 29108-1225
37. Oconee County	(864) 638-4420	Medicaid Eligibility Oconee DHHS 223 B Kenneth St. Walhalla, SC 29691
38. Orangeburg County	(803) 515-1793	Medicaid Eligibility Orangeburg County DHHS 2570 Old St. Matthews Rd., N.E. Orangeburg, SC 29118 Post Office Box 1407 Orangeburg, SC 29116-1407
39. Pickens County	(864) 898-5815	Medicaid Eligibility Pickens County DHHS 212 McDaniel Ave. Pickens, SC 29671 Post Office Box 160 Pickens, SC 29671-0160
40. Richland County	(803) 714-7562 (803) 714-7549	Medicaid Eligibility Richland County DHHS 3220 Two Notch Rd. Columbia, SC 29204-2826

SECTION 5 ADMINISTRATIVE SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES COUNTY OFFICES

County	Telephone No.	Address
41. Saluda County	(864) 445-2139 Toll Free: 1-800-551-1909	Medicaid Eligibility Saluda County DHHS 613 Newberry Highway Saluda, SC 29138-8903 Post Office Box 245 Saluda, SC 29138-0245
42. Spartanburg County	(864) 596-2714	Medicaid Eligibility Spartanburg County DHHS Pinewood Shopping Center 1000 N. Pine St., Suite 23 Spartanburg, SC 29303
43. Sumter County	(803) 774-3447	Medicaid Eligibility Sumter County DHHS 105 N. Magnolia St., 3rd Floor Sumter, SC 29150-4941 Post Office Box 2547 Sumter, SC 29151-2547
44. Union County	(864) 424-0227	Medicaid Eligibility Union County DHHS 200 S. Mountain St. Union, SC 29379 Post Office Box 1068 Union, SC 29379
45. Williamsburg County	(843) 355-5411	Medicaid Eligibility Williamsburg County DSS 831 Eastland Ave. Kingstree, SC 29556 Post Office Box 767 Kingstree, SC 29556

SECTION 5 ADMINISTRATIVE SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES COUNTY OFFICES

County	Telephone No.	Address
46. York County	(803) 366-1900	Medicaid Eligibility York County DHHS 1890 Neelys Creek Road Rock Hill, SC 29730 Post Office Box 710 Rock Hill, SC 29731-6710